

Welcome to the PIA for FY 2011!

Congress passed the E-Government Act of 2002 to encourage the use of Web-based Internet applications or other information technology by Government agencies, with the intention of enhancing access to government information and services and increasing the effectiveness, efficiency, and quality of government operations.

To combat public concerns regarding the disclosure of private information, the E-Government Act mandated various measures, including the requirement that Federal agencies conduct a Privacy Impact Assessment (PIA) for projects with information technology systems that collect, maintain, and/or disseminate "personally identifiable information" of the public. Personally identifiable information, or "personal information," is information that may be used to identify a specific person.

The Privacy Act and VA policy require that personally identifiable information only be used for the purpose(s) for which it was collected, unless consent (opt-in) is granted. Individuals must be provided an opportunity to provide consent for any secondary use of information, such as use of collected information for marketing.

Directions:

VA 6508 is the directive which outlines the PIA requirement for every System/Application/Program.

If you find that you can't click on checkboxes, make sure that you are: 1) Not in "design mode" and 2) you have enabled macros.

PIA Website: http://vawww.privacy.va.gov/Privacy_Impact_Assessments.asp

Roles and Responsibilities:

Roles and responsibilities for the specific process are clearly defined for all levels of staff in the VA Directive 6508 referenced in the procedure section of this document.

- a. The Privacy Officer is responsible for the overall coordination and review of the PIA to ensure compliance with VA Directive 6508.
- b. Records Officer is responsible for supplying records retention and deletion schedules.
- c. Information Technology (IT) staff responsible for the privacy of the system data will perform a PIA in accordance with VA Directive 6508 and to immediately report all anomalies to the Privacy Service and appropriate management chain.
- d. Information Security Officer (ISO) is responsible for assisting the Privacy Officer and providing information regarding security controls.
- e. The CIO is responsible for ensuring that the systems under his or her jurisdiction undergo a PIA. This responsibility includes identifying the IT systems; coordinating with the Privacy Officer, Information Security Officer, and others who have concerns about privacy and security issues; and reviewing and approving the PIA before submission to the Privacy Service.

Definition of PII (Personally Identifiable Information)

Information in identifiable form that is collected and stored in the system that either directly identifies an individual by name, address, social security number, telephone number, e-mail address, biometric identifiers, photograph, or other unique numbers, codes or characteristics or combined, indirect identify an individual such as a combination of gender, race, birth date, geographical indicators, license number is also considered PII.

Macros Must Be Enabled on This Form

Microsoft Office 2003: To enable macros, go to: 1) Tools > Macros > Security - Set to Medium; 2) Click OK; 3) Close the file and when reopening click on Enable Macros at the prompt.

Microsoft Office 2007: To enable macros, go to: 1) Office Button > Prepare > Excel Options > Trust Center > Trust Center Settings > Macro Settings > Enable

All Macros; 2) Click OK

Final Signatures

Final Signatures are digitally signed or wet signatures on a case by case basis. All signatures should be done when all modifications have been approved by the VA Privacy Service and the reviewer has indicated that the signature is all that is necessary to obtain approval.

Privacy Impact Assessment Uploaded into SMART

Privacy Impact Assessments should be uploaded into C&A section of SMART.

All PIA Validation Letters should be emailed to christina.pettit@va.gov to received full credit for submission.

(FY 2011) PIA: System Identification

Program or System Name: REGION 1>VHA>VISN 18>NEW MEXICO VA HEALTHCARE SYSTEM>LAN
OMB Unique System / Application / Program Identifier (AKA: UPID #): 029-00-02-00-01-1120-00

Description of System/ Application/ Program: New Mexico VA HealthCare System uses the local area network (LAN) system to provide an integrated hospital information system environment. The LAN is a Microsoft windows network that comprises commercial off the shelf software for network operating system office automation software, and specialized software to meet the office automation, imaging, and medical needs of our employees, patients, volunteers, and other stakeholders. The LAN system does not in of itself collect data; however, it is interlinked with the VISTA system and is also linked to clinical specialty systems and the va intranet, and via securit gateways, to the internet.

Facility Name:	New Mexico VA HealthCare System		
Title:	Name:	Phone:	Email:
Privacy Officer:	Jill E. Baker	(505) 265-1711 Ext: 5435	Jill.Baker@va.gov
Information Security Officer:	Robert L. McCall	(505) 256-5759	Robert.McCal@va.gov
System Owner/ Chief Information Officer:	Jerome P. Nutter	(505) 265-1711 Ext: 6006	Jerome.Nutter@va.gov
Information Owner:	Jerome P. Nutter	(505) 265-1711 Ext: 6006	Jerome.Nutter@va.gov
Other Titles:			
Person Completing Document:	Robert L. McCall	(505) 256-5759	Robert.McCal@va.gov
Other Titles:			
Date of Last PIA Approved by VACO Privacy Services: (MM/YYYY)	06/2008		
Date Approval To Operate Expires:	08/2011		
What specific legal authorities authorize this program or system:	Title 38, United States Code, Section 7301(a)		
What is the expected number of individuals that will have their PII stored in this system:	350,000-500,000		
Identify what stage the System / Application / Program is at:	Operations/Maintenance		
The approximate date (MM/YYYY) the system will be operational (if in the Design or Development stage), or the approximate number of years the system/application/program has been in operation.	Estimated 30+ years		
Is there an authorized change control process which documents any changes to existing applications or systems?	Yes		
If No, please explain:			
Has a PIA been completed within the last three years?	Yes		
Date of Report (MM/YYYY):	12/2010		

Please check the appropriate boxes and continue to the next TAB and complete the remaining questions on this form.

- ☒ Have any changes been made to the system since the last PIA?
- ☐ Is this a PIV system/application/program collecting PII data from Federal employees, contractors, or others performing work for the VA?
- ☒ Will this system/application/program retrieve information on the basis of name, unique identifier, symbol, or other PII data?

- ☒ Will this system/application/program retrieve information on the basis of name, unique identifier, symbol, or other PII data?
- ☒ Does this system/application/program collect, store or disseminate PII/PHI data?
- ☒ Does this system/application/program collect, store or disseminate the SSN?

If there is no Personally Identifiable Information on your system , please complete TAB 7 & TAB 12. (See Comment for Definition of PII)

(FY 2011) PIA: System of Records

Is the data maintained under one or more approved System(s) of Records? If the answer above no, please skip to row 15.

Yes

For each applicable System(s) of Records, list:

1. All System of Record Identifier(s) (number):

24VA19

2. Name of the System of Records:

Patient Medical Records

3. Location where the specific applicable System of Records Notice may be accessed (include the URL):

http://www.rms.oit.va.gov/SOR_Records/24VA19.asp

Have you read, and will the application, system, or program comply with, all data management practices in the System of Records Notice(s)?

Yes

Does the System of Records Notice require modification or updating?

No

(Please Select Yes/No)

Is PII collected by paper methods?

Yes

Is PII collected by verbal methods?

Yes

Is PII collected by automated methods?

Yes

Is a Privacy notice provided?

Yes

Proximity and Timing: Is the privacy notice provided at the time of data collection?

Yes

Purpose: Does the privacy notice describe the principal purpose(s) for which the information will be used?

Yes

Authority: Does the privacy notice specify the effects of providing information on a voluntary basis?

Yes

Disclosures: Does the privacy notice specify routine use(s) that may be made of the information?

Yes

(FY 2011) PIA: Notice

Please fill in each column for the data types selected.

Data Type	Collection Method	What will the subjects be told about the information collection?	How is this message conveyed to them?	How is a privacy notice provided?
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	N/A			
Family Relation (spouse, children, parents, grandparents, etc)	N/A			
Service Information	N/A			
Medical Information	VA File Database	How the data will be protected and disseminated to the appropriate personnel in the performance of their duties in providing patient care	Verbal & Written	Verbal & Written
Criminal Record Information				
Guardian Information	VA File Database	How the data will be protected and disseminated to the appropriate personnel in the performance of their duties in providing patient care	Verbal & Written	Verbal & Written
Education Information	N/A			
Benefit Information	VA File Database	How the data will be protected and disseminated to the appropriate personnel in the performance of their duties in providing patient care	Verbal & Written	Verbal & Written

Data Type	Is Data Type Stored on your system?	Source (If requested, identify the specific file, entity and/or name of agency)	Is data collection Mandatory or Voluntary?	Additional Comments
Veteran or Primary Subject's Personal Contact Information (name, address, telephone, etc)	Yes	VA Files / Databases (Identify file)	Mandatory	
Family Relation (spouse, children, parents, grandparents, etc)	Yes	VA Files / Databases (Identify file)	Mandatory	
Service Information	Yes	VA Files / Databases (Identify file)	Mandatory	
Medical Information	Yes	VA Files / Databases (Identify file)	Mandatory	
Criminal Record Information	No			
Guardian Information	Yes	VA Files / Databases (Identify file)	Mandatory	
Education Information	No			
Benefit Information	Yes	VA Files / Databases (Identify file)	Mandatory	
Other (Explain)				
Other (Explain)				
Other (Explain)				

(FY 2011) PIA: Data Sharing

Organization	Name of Agency/Organization	Do they access this system?	Identify the type of Data Sharing and its purpose.	Is PII or PHI Shared?	What is the procedure you reference for the release of information?
Internal Sharing: VA Organization	Five (5) Community Based Outpatient Clinic	Yes	Veteran's information utilized in providing health care to the veteran	Both PII & PHI	Interconnection Service Agreeemnt approved by the Facility Director and CIO
Other Veteran Organization					
Other Federal Government Agency	U.S. Air Force	Yes	Employee and veteran medical data necessary for the medical treatment of the these personnel.	Both PII & PHI	Joint Venture Agreement approved by the Facility Director
State Government Agency	New Mexico Cancer Registry	No	Statistical Cancer related data for the State of New Mexico reporting	PHI	Interconnection Service Agreeemnt approved by the Facility Director
Local Government Agency					
Research Entity	Cooperative Study Program	Yes	Research Sensitive information for Research projects	PHI	ISA approved by the Facility Director
Other Project / System	University of New Mexico	Yes	Protected Health Information for treatment of veterans and for research projects	Both PII & PHI	Interconnection Service Agreement approved by the Facility Director & CIO
Other Project / System					
Other Project / System					

(FY 2011) PIA: Access to Records

Does the system gather information from another system? Yes

Please enter the name of the system: REGION 1>VHA>VISN 18>NEW MEXICO VA HEALTHCARE SYSTEM>VISTA

Per responses in Tab 4, does the system gather information from an individual? Yes

If information is gathered from an individual, is the information provided:

- ☒ Through a Written Request
- ☒ Submitted in Person
- ☐ Online via Electronic Form

Is there a contingency plan in place to process information when the system is down?

Yes

(FY 2011) PIA: Secondary Use

Will PII data be included with any secondary use request?

No

if yes, please check all that apply:

- ☐ Drug/Alcohol Counseling
- ☐ Research
- ☐ Mental Health
- ☐ Sickle Cell
- ☐ HIV
- ☐ Other (Please Explain)

Describe process for authorizing access to this data.

(FY 2011) PIA: Program Level Questions

Does this PIA form contain any sensitive information that could cause harm to the Department of Veterans Affairs or any party if disclosed to the public?

Yes

If Yes, Please Specify: Unauthorized disclosure of patient sensitive information, e.g. identity theft, etc.

Explain how collected data are limited to required elements:

Enough data is obtained to create a user account

How is data checked for completeness?

Submission of the appropriate access request from the individual's supervisor or designee

What steps or procedures are taken to ensure the data remains current and not out of date?

Constant review of the user accounts every 90 days

How is new data verified for relevance, authenticity and accuracy?

Confirmation from the individual's supervisor or designee

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 2011) PIA: Retention & Disposal

What is the data retention period?

In accordance with the records disposition authority approved by the Archivist of the United States, paper records and information stored on electronic storage media are maintained for 75 years after the last episode of patient care then destroyed/deleted.

Explain why the information is needed for the indicated retention period?

To determine when the user account was disabled per VA 6500 Handbook and for extracting data from the individual's account as deemed necessary by facility management

What are the procedures for eliminating data at the end of the retention period?

The user account will be terminated per VA 6500 Handbook and all outlook message and network drive data will be erased

Where are these procedures documented?

VA 6500 Handbook

How are data retention procedures enforced?

Per RCS10-1

Has the retention schedule been approved by the National Archives and Records Administration (NARA)

Yes

Additional Information: (Provide any necessary clarifying information or additional explanation for this section.)

Answer:

(FY 2011) PIA: Children's Online Privacy Protection Act (COPPA)

Will information be collected through the internet from children under age 13?

No

If Yes, How will parental or guardian approval be obtained?
Answer:

(FY 2011) PIA: Security

Is the system/application/program following IT security Requirements and procedures required by federal law and policy to ensure that information is appropriately secured. Yes

Has the system/application/program conducted a risk assessment, identified appropriate security controls to protect against that risk, and implemented those controls.. Yes

Is security monitoring conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information? Yes

Is security testing conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information? Yes

Are performance evaluations conducted on at least a quarterly basis to ensure that controls continue to work properly, safeguarding the information? Yes

If 'No' to any of the 3 questions above, please describe why:

Answer:

Is adequate physical security in place to protect against unauthorized access? Yes

If 'No' please describe why:

Answer:

Explain how the project meets IT security requirements and procedures required by federal law.

Complying with established NIST\VA\VHA guidelines and directives

Explain what security risks were identified in the security assessment? *(Check all that apply)*

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Air Conditioning Failure | <input type="checkbox"/> Data Disclosure | <input checked="" type="checkbox"/> Hardware Failure |
| <input checked="" type="checkbox"/> Chemical/Biological Contamination | <input type="checkbox"/> Data Integrity Loss | <input type="checkbox"/> Identity Theft |
| <input type="checkbox"/> Blackmail | <input type="checkbox"/> Denial of Service Attacks | <input type="checkbox"/> Malicious Code |
| <input type="checkbox"/> Bomb Threats | <input type="checkbox"/> Earthquakes | <input checked="" type="checkbox"/> Power Loss |
| <input type="checkbox"/> Burglary/Break In/Robbery | <input type="checkbox"/> Eavesdropping/Interception | <input type="checkbox"/> Sabotage/Terrorism |
| <input type="checkbox"/> Cold/Frost/Snow | <input type="checkbox"/> Errors (Configuration and Data Entry) | <input type="checkbox"/> Storms/Hurricanes |
| <input checked="" type="checkbox"/> Communications Loss | <input type="checkbox"/> Fire (False Alarm, Major, and Minor) | <input type="checkbox"/> Substance Abuse |
| <input type="checkbox"/> Computer Intrusion | <input checked="" type="checkbox"/> Flooding/Water Damage | <input type="checkbox"/> Theft of Assets |
| <input checked="" type="checkbox"/> Computer Misuse | <input type="checkbox"/> Fraud/Embezzlement | <input type="checkbox"/> Theft of Data |
| <input type="checkbox"/> Data Destruction | | <input type="checkbox"/> Vandalism/Rioting |

Answer: (Other Risks)

Explain what security controls are being used to mitigate these risks. (Check all that apply)

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> Access Control | <input checked="" type="checkbox"/> Contingency Planning | <input type="checkbox"/> Personnel Security |
| <input checked="" type="checkbox"/> Audit and Accountability | <input type="checkbox"/> Identification and Authentication | <input checked="" type="checkbox"/> Physical and Environmental Protection |
| <input type="checkbox"/> Awareness and Training | <input type="checkbox"/> Incident Response | <input checked="" type="checkbox"/> Risk Management |
| <input checked="" type="checkbox"/> Certification and Accreditation Security Assessments | | |
| <input checked="" type="checkbox"/> Configuration Management | <input type="checkbox"/> Media Protection | |

Answer: (Other Controls)

PIA: PIA Assessment

Identify what choices were made regarding the project/system or collection of information as a result of performing the PIA.

Collection source, Method of data collection, and the associated security controls associated with the protection of the data

Availability Assessment: If the data being collected is not available to process for any reason what will the potential impact be upon the system or organization?
(Choose One)

- | | |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of availability could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of availability could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of availability could be expected to have a limited adverse effect on operations, assets or individuals. |

Integrity Assessment: If the data being collected has been corrupted for any reason what will the potential impact be upon the system or organization?
(Choose One)

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of integrity could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of integrity could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of integrity could be expected to have a limited adverse effect on operations, assets or individuals. |

Confidentiality Assessment: If the data being collected has been shared with unauthorized individuals what will the potential impact be upon the system or organization? (Choose One)

- | | |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | The potential impact is high if the loss of confidentiality could be expected to have a severe or catastrophic adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is moderate if the loss of confidentiality could be expected to have a serious adverse effect on operations, assets or individuals. |
| <input type="checkbox"/> | The potential impact is low if the loss of confidentiality could be expected to have a limited adverse effect on operations, assets or individuals. |

The controls are being considered for the project based on the selections from the previous assessments?

The minimum security requirements for our high impact system cover seventeen security-related areas with regard to protecting the confidentiality, integrity, and availability of VA information systems and the information processed, stored, and transmitted by those systems. The security-related areas include: access control; awareness and training; audit and accountability; certification, accreditation, and security assessments; configuration management; contingency planning; identification and authentication; incident response; maintenance; media protection; physical and environmental protection; planning; personnel security; risk assessment; systems and services acquisition; system and communications protection; and system and information integrity. Our facility employs all security controls in the respective high impact security control baseline unless specific exceptions have been allowed based on the tailoring guidance provided in NIST Special Publication 800-53 and specific VA directives.

Please add additional controls:

(FY 2011) PIA: Additional Comments

Add any additional comments or information that may have been left out for any question. Please indicate the question you are responding to and then add your comments.

The LAN does collect the minimum Personal Identifiable Information required to create the network user account, e.g. employee's name. The data is stored on servers located on the LAN. This Privacy Impact Assessment addresses the LAN as a transport delivery system of data to and from the desktop computers, printers, and the web.

(FY 2011) PIA: VBA Minor Applications

Which of these are sub-components of your system?

Access Manager	Automated Sales Reporting (ASR)	Automated Folder Processing System (AFPS)
Actuarial	BCMA Contingency Machines	Automated Medical Information Exchange II (AIME II)
Appraisal System	Benefits Delivery Network (BDN)	Automated Medical Information System (AMIS)290
ASSISTS	Centralized Property Tracking System	Automated Standardized Performance Elements Nationwide (ASPEN)
Awards	Common Security User Manager (CSUM)	Centralized Accounts Receivable System (CARS)
Awards	Compensation and Pension (C&P)	Committee on Waivers and Compromises (COWC)
Baker System	Control of Veterans Records (COVERS)	Compensation and Pension (C&P) Record Interchange (CAPRI)
Bbraun (CP Hemo)	Control of Veterans Records (COVERS)	Compensation & Pension Training Website
BDN Payment History	Control of Veterans Records (COVERS)	Corporate Waco, Indianapolis, Newark, Roanoke, Seattle (Corporate WINRS)
BIRLS	Courseware Delivery System (CDS)	Distribution of Operational Resources (DOOR)
C&P Payment System	Dental Records Manager	Educational Assistance for Members of the Selected Reserve Program CH 1606
C&P Training Website	Education Training Website	Electronic Performance Support System (EPSS)
CONDO PUD Builder	Electronic Appraisal System	Enterprise Wireless Messaging System (Blackberry)
Corporate Database	Electronic Card System (ECS)	Financial Management Information System (FMI)
Data Warehouse	Electronic Payroll Deduction (EPD)	Hearing Officer Letters and Reports System (HOLAR)
EndoSoft	Eligibility Verification Report (EVR)	Inquiry Routing Information System (IRIS)
FOCAS	Fiduciary Beneficiary System (FBS)	Modern Awards Process Development (MAP-D)
Inforce	Fiduciary STAR Case Review	Personnel and Accounting Integrated Data and Fee Basis (PAID)
INS - BIRLS	Financial and Accounting System (FAS)	Personal Computer Generated Letters (PCGL)
Insurance Online	Insurance Unclaimed Liabilities	Personnel Information Exchange System (PIES)
Insurance Self Service	Inventory Management System (IMS)	Personnel Information Exchange System (PIES)
LGY Home Loans	LGY Centralized Fax System	Post Vietnam Era educational Program (VEAP) CH 32
LGY Processing	Loan Service and Claims	Purchase Order Management System (POMS)
Mobilization	Loan Guaranty Training Website	Reinstatement Entitlement Program for Survivors (REAPS)
Montgomery GI Bill	Master Veterans Record (MVR)	Reserve Educational Assistance Program CH 1607
MUSE	Mental Health Assistant	Service Member Records Tracking System
Omnicell	National Silent Monitoring (NSM)	Survivors and Dependents Education Assistance CH 35
Priv Plus	Powerscribe Dictation System	Systematic Technical Accuracy Review (STAR)
RAI/MDS	Rating Board Automation 2000 (RBA2000)	Training and Performance Support System (TPSS)
Right Now Web	Rating Board Automation 2000 (RBA2000)	VA Online Certification of Enrollment (VA-ONCE)
SAHSHA	Rating Board Automation 2000 (RBA2000)	VA Reserve Educational Assistance Program
Script Pro	Records Locator System	Veterans Appeals Control and Locator System (VACOLS)
SHARE	Review of Quality (ROQ)	Veterans Assistance Discharge System (VADS)
SHARE	Search Participant Profile (SPP)	Veterans Exam Request Info System (VERIS)
SHARE	Spinal Bifida Program Ch 18	Veterans Service Representative (VSR) Advisor
Sidexis	State Benefits Reference System	Vocational Rehabilitation & Employment (VR&E) CH 31
Synquest	State of Case/Supplemental (SOC/SSOC)	Waco Indianapolis, Newark, Roanoke, Seattle (WINRS)

VBA Data Warehouse
VBA Training Academy
Veterans Canteen Web
VIC
VR&E Training Website
Web LGY

Telecare Record Manager
VBA Enterprise Messaging System
Veterans On-Line Applications (VONAPP)
Veterans Service Network (VETSNET)
Web Electronic Lender Identification

Web Automated Folder Processing System (WAFPS)
Web Automated Reference Material System (WARMS)
Web Automated Verification of Enrollment
Web-Enabled Approval Management System (WEAMS)
Web Service Medical Records (WebSMR)
Work Study Management System (WSMS)

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Name
Description
Comments
Is PII collected by this min or application?
Does this minor application store PII?
If yes, where?
Who has access to this data?

Name
Description
Comments
Is PII collected by this min or application?
Does this minor application store PII?
If yes, where?
Who has access to this data?

Name
Description
Comments
Is PII collected by this min or application?
Does this minor application store PII?
If yes, where?
Who has access to this data?

(FY 2011) PIA: VISTA Minor Applications

Which of these are sub-components of your system?

ASISTS	Beneficiary Travel	Accounts Receivable	Adverse Reaction Tracking
Bed Control	Care Management	ADP Planning (PlanMan)	Authorization/ Subscription
CAPRI	Care Tracker	Bad Code Med Admin	Auto Replenishment/ Ward Stock
CMOP	Clinical Reminders	Clinical Case Registries	Automated Info Collection Sys
Dental	CPT/ HCPCS Codes	Clinical Procedures	Automated Lab Instruments
Dietetics	DRG Grouper	Consult/ Request Tracking	Automated Med Info Exchange
Fee Basis	DSS Extracts	Controlled Substances	Capacity Management - RUM
GRECC	Education Tracking	Credentials Tracking	Capacity Management Tools
HINQ	Engineering	Discharge Summary	Clinical Info Resource Network
IFCAP	Event Capture	Drug Accountability	Clinical Monitoring System
Imaging	Extensible Editor	EEO Complaint Tracking	Enrollment Application System
Kernal	Health Summary	Electronic Signature	Equipment/ Turn-in Request
Kids	Incident Reporting	Event Driven Reporting	Gen. Med.Rec. - Generator
Lab Service	Intake/ Output	External Peer Review	Health Data and Informatics
Letterman	Integrated Billing	Functional Independence	ICR - Immunology Case Registry
Library	Lexicon Utility	Gen. Med. Rec. - I/O	Income Verification Match
Mailman	List Manager	Gen. Med. Rec. - Vitals	Incomplete Records Tracking
Medicine	Mental Health	Generic Code Sheet	Interim Mangement Support
MICOM	MyHealthEVet	Health Level Seven	Master Patient Index VistA
NDBI	National Drug File	Hospital Based Home Care	Missing Patient Reg (Original) A4EL
NOIS	Nursing Service	Inpatient Medications	Order Entry/ Results Reporting
Oncology	Occurrence Screen	Integrated Patient Funds	PCE Patient Care Encounter
PAID	Patch Module	MCCR National Database	Pharmacy Benefits Mangement
Prosthetics	Patient Feedback	Minimal Patient Dataset	Pharmacy Data Management
QUASER	Police & Security	National Laboratory Test	Pharmacy National Database
RPC Broker	Problem List	Network Health Exchange	Pharmacy Prescription Practice
SAGG	Progress Notes	Outpatient Pharmacy	Quality Assurance Integration
Scheduling	Record Tracking	Patient Data Exchange	Quality Improvement Checklist
Social Work	Registration	Patient Representative	Radiology/ Nuclear Medicine
Surgery	Run Time Library	PCE Patient/ HIS Subset	Release of Information - DSSI
Toolkit	Survey Generator	Security Suite Utility Pack	Remote Order/ Entry System
Unwinder	Utilization Review	Shift Change Handoff Tool	Utility Management Rollup
VA Fileman	Visit Tracking	Spinal Cord Dysfunction	CA Verified Components - DSSI
VBECS	VistALink Security	Text Integration Utilities	Vendor - Document Storage Sys
VDEF	Women's Health	VHS & RA Tracking System	Visual Impairment Service Team ANRV
VistALink		Voluntary Timekeeping	Voluntary Timekeeping National

Explain any minor application that are associated with your installation that does not appear in the list above. Please provide name, brief description, and any comments you may wish to include.

Name

Description

Comments

Is PII collected by this minor application?

Does this minor application store PII?

If yes, where?

Who has access to this data?

Name

Description

Comments

Is PII collected by this minor application?

Does this minor application store PII?

If yes, where?

Who has access to this data?

Name

Description

Comments

Is PII collected by this minor application?

Does this minor application store PII?

If yes, where?

Who has access to this data?

(FY 2011) PIA: Minor Applications

Which of these are sub-components of your system?

1184 Web

ENDSOFT

RAFT

Enterprise Terminology Server &

RALS

A4P

x

VHA Enterprise Terminology
Services

(FY 2011) PIA: Final Signatures

Facility Name: REGION 1>VHA>VISN 18>NEW MEXICO VA HEALTHCARE SYSTEM>LAN

Title:	Name:	Phone:	Email:
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Privacy Officer:

Jill E. Baker

(505) 265-1711

Ext 5435

Jill.Baker@va.gov




Information Security Officer:

Robert L. McCall

(505) 256-5759

Robert.McCall@va.gov



System Owner/ Chief Information Officer:

Jerome P. Nutter

(505) 265-1711

Ext 6006

Jerome.Nutter@va.gov



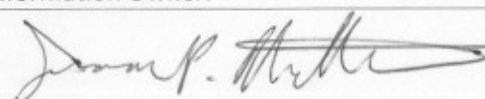
Information Owner:

Jerome P. Nutter

(505) -265-1711

Ext 6006

Jerome.Nutter@va.gov



Other Titles:



Date of Report:

12/15/10

OMB Unique Project Identifier

029-00-02-00-01-1120-00

Region 1>VHA>VISN 18>New
Mexico VA Healthcare
System>LAN